UNITED STATES DISTRICT COURT

for the

SOUTHERN DISTRICT OF NEW YORK

| Robert Barbera, |) |
|-----------------------------|-------------------|
| Plaintiff(s) |) |
| V. |) Civil Action No |
| All Season Protection Inc., |) |
| Defendant(s) |) |

SUMMONS IN A CIVIL ACTION

To: (Defendant's name and address)
All Season Protection Inc.
c/o Nicholas Libecci
204 W 84th Street
New York, NY 10024

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) – or 60 days if you are the United States, or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) – you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

CRAIG SANDERS SANDERS LAW GROUP

333 Earle Ovington Blvd, Suite 402 Uniondale, NY 11553

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

| | CLERK OF COURT |
|-------|------------------------------------|
| | |
| Date: | |
| | Signature of Clerk or Deputy Clerk |

Civil Action No.

PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (1))

| This Sum | nmons for (name | of individual and ti | itle, if any) | | |
|-----------------|-------------------|----------------------|--|--|----------|
| was received by | me on (date) | | · | | |
| [] I pers | sonally served th | ne summons on | the individual at | (place) | |
| | | | | on (date) | ; or |
| | | | | al place of abode with and discretion who resi | |
| | | | | lividual's last known ad | |
| | | | | arvidadi 5 last Kilowii ad | |
| designate | ed by law to acce | ent service of pr | ocess on behalf o | of (name of organization) | , who is |
| | | | | ; or | |
| | | | | , , ,, | : or |
| | r (specify): | | | | |
| My fees a | are \$ | for travel an | d \$ | for services, for a total | l of \$ |
| I declare | under penalty o | f perjury that thi | is information is | true. | |
| ъ. | | | | | |
| Date: | | | Server's signature Printed name and title | | |
| | | | | | |
| | | | | Server's address | |

Additional information regarding attempted service, etc: